PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

1141.009

									1141	.00	7	
CLAIMS AS FILED - PART I									NTITY		OTHE	R THAN
TOTAL CLAIMS			(Column 1)		(Column 2)		TYPE			OR		ENTITY
			4.3		 :		RA	TE	FEE]	RATE	FEE
FOR .			NUMBER FILED		NUMBER EXTRA		BASIC	FEE	385.00	OR	BASIC FEE	770.00
TO	OTAL CHARGE	ABLE CLAIMS	43 m	inus 20=	23	?	xs	9=	207	OR	X\$18=	
INI	DEPENDENT C	CLAIMS	3 minus 3 = * 2			,	X4:	3=	007	1	V00	
M	JLTIPLE DEPE	NDENT CLAIM P	RESENT							OR	1 700-	
* If the difference in column 1 is less than zero, enter "0" in column 2								5=		OR	+290=	
·								AL	592	OR	TOTAL	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							OTHER THAN					
	1	(Column 2			(Column 3)	SMA	LLI	ENTITY	OR	SMALL	ENTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA	RAT	Έ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9)=		OR	X\$18=	
AME	Independent	*	Minus	***		=	X43	_		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+145			1	+290=	
		•				•		- TAL		OR	TOTAL	
	·					,	ADDIT. F		<u> </u>	OR	ADDIT. FEE	
		(Column 1) I CLAIMS	1	(Colum I HIGHE		(Column 3)						
AMENDMENT B		REMAINING AFTER AMENDMENT		NUMBI PREVIOU PAID F	ER JSLY	PRESENT EXTRA	RATI	Ξ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9	_]		OR	X\$18=	
	Independent	*	Minus	***		=	X43=	1			X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							-		OR	7002	
								= [ÖR	+290=	
							ADDIT. F			OR ,	TOTAL ADDIT, FEE	
		(Column 1)	•	(Column	n 2)	(Column 3)		•				
MEN		CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOU PAID FO	R ISLY	PRESENT EXTRA	RATE		ADDI- TONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9=			OR	X\$18=	
	Independent		Minus	***		=	X43=	+		<u> </u>		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+		OR	X86=	
							+145=			OR	+290=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."											· ·	
T	he *Highest Num	ber Previously Paid	For" (Total or	Independent) is the I	is, enter 3." highest number	lourid in the	appro	priate box			